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ABSTRACT

Measures of accountability and evaluation of social work program efforts are examined. Evaluation of program effort refers to an assessment of the amount and kinds of program activities considered necessary for the accomplishment of program goals within a particular stage of development. It refers not only to staff time, activity, and commitment, but also to the allocation and use of material resources such as funds, space, and equipment. The social service agency would be expected to provide: 1) clearly defined goals which can be accomplished with a reasonable degree of competence; 2) a pursuit of excellence in delivering services as effectively and humanely as possible; and 3) agency personnel who are well-trained to function within the particular agency with skill and competence. A few of the techniques which can improve the standard of accountability are the summative and formative evaluations, the Management by Objectives system, service management approach, and an accountability recording system of casework. The key characteristic of each of these techniques is that they attempt to establish and accomplish clearly-defined goals based on the intended client's values and needs. If the goals of policy are not made more coherent and more consistent and if performance is not more explicit and realistic, then there is little hope of attaining accountability for either the agency or the social worker. (Author/RM)

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SOME MEASURES OF EVALUATION AND EFFECTIVENESS IN SOCIAL WORK PRACTICE

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SOME MEASURES OF EVALUATION AND EFFECTIVENESS IN SOCIAL WORK PRACTICE

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Historically speaking, social workers have been responsible in some ways for providing selected data to account for effective services to several systems. Important among them are: (1) the source of funding, (2) the employing agency, (3) the profession, and (4) the client.[1] A variety of measures have been used to fulfill this responsibility. These measures, in the past, have included the provision of (1) fiscal statements and audits to funding organizations showing that monies have been appropriately spent according to predetermined categories, (2) evidence through conferences and case recordings to supervisors and professional peers that certain practice procedures have been followed, (3) case counts to board directors enumerating and justifying the number and types of clients to be served, and (4) case examples to boards of directors and the general public indicating desirable outcomes of their activities (Lawrence, p. 1).

In more recent years, some changes have been observed in the nature of data that are required to demonstrate accountability. Now, an increased emphasis is given to the data which are derived from implementation of a formal evaluation plan directly focusing on effort, effectiveness, and efficiency.

Evaluation of program effort refers to an assessment of the amount and kinds of program activities considered necessary for the accomplishment of

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[1] Fischer indicates that in addition to these four systems, social workers are also accountable to themselves in terms of their own values and "conscience" (p. 42); whereas, Brill includes only three levels of the client, the agency, and the society (p. 201).

program goals within a particular stage of development. It refers not only to a staff time, activity, and commitment, but also to the allocation and use of material resources - funds, space, equipment, etc. It is quantitative, descriptive information and indicates that staff and program are active. Effectiveness refers to the extent to which goals are accomplished at a given stage. Program efficiency focuses on the relationship between effort and effectiveness. It is the ratio of effectiveness to effort, and it is concerned with the relative costs for achieving program objectives. Costs include expenditure of manpower, time, money, physical facilities and so forth (Tripodi, Fellin and Epstein, pp. 42-50).

Clear goal statements are necessary conditions for an evaluation of outcome. New and improving ways of measuring effectiveness are increasingly being demanded by funding sources. The federal government requires evaluation of many of its grant programs as part of the grant itself. Other funding agencies also seek independent evaluations of programs they fund and they often finance such program evaluations by agencies known to be impartial and competent. These agencies have used evaluation methods like cost benefit analysis, quality control devices, Planning, Programming and Budgeting System (PPBS), and Program Evaluation and Review Techniques (PERT). These methods, though found very useful in business enterprises, have some limitations in human service professions. For instance, cost benefit analysis makes it possible to weigh the cost of various kinds of programs against each other. In the social work profession, it is difficult to analyze cost as it relates to benefit. Similarly, quality control devices tend to insure equal treatment of clients rather than effective differential diagnosis of treatment. PPBS, originated by the Defense Department, includes continuous feedback and monitoring capabilities. Monitoring is an important aspect of any evaluation scheme. However, monitoring of effectiveness becomes difficult

in social work practice because most of the tasks that social workers perform are not defined discretely or sequentially.

Since evaluation of social work practice is essentially directed toward measuring program effectiveness and program processes, summative and formative evaluation can be found useful in the social work profession.[2]

Summative Evaluation

Summative evaluations, focusing on the extent to which a program is reaching its goals, should, whenever possible, employ experimental designs when examining programs that are to be judged by their results. The very best summative evaluation has all the characteristics of the best research study. It uses highly valid and reliable instruments, and it applies a powerful evaluation design. Evaluations of this caliber could be published and disseminated to both the lay and research community. Few evaluations, of course, live up to such rigid standards. The critical characteristic of any one evaluation study is that it provides the best possible information that could have been collected under the circumstances, and that this information meets the credibility requirements of its evaluation audience.

The aim of the evaluation is to provide findings about a program which can be generalized to other contexts beyond it. Though it is important as a service

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[2]Summative evaluation refers to the study of program effectiveness, while formative evaluation refers to the study of program processes. Both types of evaluation will also occur on two levels. At the program level, social workers are asked to measure the impact and the nature of programs such as child protection, family counseling, head start, and so on. However, evaluation will also occur at the level of individual worker and client relationships. At the program level, we ask what is the nature of human service programs, what are their outcomes, and what leads us to believe that the programs lead to the outcomes. At the individual level, we ask what is the nature of individual intervention made by social workers and clients, what are their presumed outcomes, and what leads us to believe that the interventions have been effective.

to the profession that the evaluator provide such information if the situation allows good design and high quality instrumentation, the evaluator can usually limit his projection of the quality of data he must collect to what he perceives will be acceptable to his unique audience. It is not beyond the scope of the evaluator's job, however, to educate his audience about what constitutes good and poor evidence of program success. It is equally within the summative evaluator's task to advocate, based on his information, changes in a program or in funding policy or to express opinions about the program's quality. The evaluator should be prepared to defend his conclusions. This would require hard data and a well designed study.

Formative Evaluation

All this discussion about design in summative evaluation should not persuade the evaluator that design is irrelevant in the formative case. The use of design during a program's formative period gives the evaluator and program staff a chance to take a good hard look at the effectiveness of the program or of selected subcomponents. This enables the formative evaluator to fulfill one of his major functions--to persuade the staff to constantly scrutinize and rethink assumptions and activities that underly the program. Careful attention to design can also help the formative evaluator to conduct small-scale pilot studies and experiments with newly-developed program components. These will inform decisions among alternative courses of action and settle controversies about more or less effective ways to install the program.

The message to the formative evaluator is this: Including a source of comparative information--a control group or data from time series measures--in any information-gathering effort makes that information more interpretable. Too often, formative measurement happens in a vacuum; no one can judge whether clients

are making fast enough progress because, for instance, no one can answer the question 'Compared to what?'

For formative evaluation, it is a good idea to set a control group at the outset, as described in Designs 1, 2, and 3, or to collect time series measures before the program begins (Designs 4 and 5).[3] Laying down the rudiments of design will give a chance to make comparisons in order to interpret findings or to justify formative recommendations.

Campbell and Stanley have discussed the sources of invalidity for these designs and statistical techniques that could be used to measure changes brought about by interventive methods (pp. 5-50 and 55-57).

Management by Objectives

A helpful tool in goal-setting and evaluating in the social service agency is Management by Objectives. It involves the participation of staff members in four areas:

(1) Mission: general direction the agency wishes to attain.

(2) Objectives: the results the agency wishes to achieve in order to remain a viable organization which is fulfilling its mission.

(3) Goals: end results to be achieved by the individuals within a period of time.

(4) Plans: the means by which goals are achieved.

An agency already may have a statement of purpose or mission, but if not, board and staff members can be asked to help formulate such a statement. Each individual can bring his own written statement to the board or staff meeting

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[3]See Appendix A for these Designs.

and compare it with other statements until a commonly agreed upon purpose is determined. It is important for objectives and goals to be determined on the individual, departmental and agency levels. In order to accomplish this, there must be communication among all three levels (all channel network). An individual caseworker cannot set his own goals and plans without an understanding of and communication with departmental personnel. Likewise, a department will have great difficulty in formulating goals without the knowledge or understanding of the caseworkers' goals and plans.

There are many values of the Management by Objectives approach:

(1) Participation of all members of the agency in the goal-making process provides a program that utilizes staff and agency resources more efficiently and responds to clients' needs more effectively. More opportunity for innovations, new directions, and shifts in emphases is afforded.

(2) By helping to establish goals, the social worker internalizes the agency's goals until they become a part of him and he becomes a part of them. Internalization of the organization's goals not only increases quantity and quality of role performance, but also carries the individual on to many specific spontaneous actions necessary for organizational survival and the highest level of performance.

(3) The individual worker is confronted with the challenge of linking his skills and knowledge to the objectives and goals of the agency, and thus, he is constantly evaluating his contributions.

(4) A sense of cohesion is felt as individual members work together to accomplish the goals and plans they have determined.

(5) Yearly evaluations of performance become a natural component of the Management by Objectives approach.

(6) The agency establishes short-range and long-range goals rather than defensive or reactive responses to requests for service.

In brief, Management by Objectives is an effective tool for practice planning. The implementation of MBO makes it necessary for staff members as individuals, as a department, as an agency, to engage in short and long-range planning. Such planning occurs through the setting of goals by individual workers, which are carefully specified in the plans. Diverse goals are brought together through common objectives of the agency, which in turn are expressed in the mission or statement of purpose of the organization. The MBO approach assists an agency in the appraisal of performance of workers, enables staff members to participate in agency planning, and helps an agency determine short and long-range goals.

Service Management Approach

The service management approach is a relatively new technique designed to raise the standard of accountability to the client. This pattern of service delivery emerged from the 1967 amendments to the Social Security Act, which emphasized goal-oriented services based on the principle of consumer demand. Such programs aim to achieve goals that are mutually agreed on by the agency and the client. However, there have been certain barriers which prevented services from being oriented towards the demands of clients:

(1) Consumers' lack of knowledge of available services.
(2) Little response from impersonal bureaucracies.
(3) Agencies' lack of visibility.
(4) Rigid eligibility requirements.
(5) Substitution of counseling for concrete services.
(6) Frustrating waiting periods.
(7) Lack of coordination between agencies.
(8) Failure to determine effectiveness of service.

The service management technique has been able to overcome some of the above-mentioned barriers. A service manager is at the center of the system, which encompasses several services designed to meet a variety of client needs. His functions include (1) interviewing the client and drawing up a mutually agreed upon contract of the clients' needs and the services available to meet the needs, (2) serving as coordinator between the client and the various services called for in the agreement, (3) evaluating the helping process used for each client, which is based upon feedback from the client and from the providers of services, and finally (4) monitoring the delivery of services to determine if they were in accordance with the objectives that initally were stated.

This approach to the delivery of social services seems to avoid some of the pitfalls inherent in a low standard of accountability. Built into the program is a continuous evaluative process and feedback system in a reasonably flexible structure. If the client or the service manager feels that changes need to be made in the contractual agreement, this can be done with a minimum of wasted time and effort. Goals and effectiveness of services are constantly being evaluated as the service manager monitors the delivery of these services.

Utilizing Accountability in Casework Records

Casework records often become useful scientific documents which provide written accounts of progress, including the clients' perceptions of the services they receive. These records should provide clues to the following administrative

concerns:

(1) Are the treatment techniques employed by caseworkers producing the anticipated results?

(2) What specific effects differ when different techniques are used by caseworkers?

(3) What is the nature of any dysfunctional behavior at the time at which treatment is sought?

(4) What is the probable cause of a syndrome under treatment?

(5) What has the agency learned about the nature of problems it treats and their prevention or response to treatment?

After the clients have terminated service with the agency, follow-up data should be made to determine if the services provided long-term or short-term assistance. Lastly, the social worker should be accountable for achievement in securing limited kinds of concrete assistance implicit in the advocate-broker role and use the casework record as an evaluation of his own self-development in professional skills. This approach relieves the social worker from altering general social problems, such as dependency and delinquency. It also avoids the dangers inherent in the expectation that the social worker should effect demonstrable changes in the behavior and lifestyle of individuals. More importantly, goals, as well as other components of the organization, can be altered or changed if services are judged to be ineffective.

Conclusion

In summary, the social work profession has been charged with lacking accountability: to the client, to the agency, and to the public. The social service agency should be expected to provide: "(1) clearly defined goals which can be accomplished with a reasonable degree of competence, (2) a pursuit of excellence in delivering services as effectively and humanely as possible, and (3)

agency personnel who are well trained to function within the particular agency with skill and competence."

On the other hand, the public should not expect guaranteed performance of the agency simply because the client plays a major role in determining how he will use the services of the agency and because societal factors may influence the effectiveness of such services. Many social workers have been working with 'crushed lives,' and persons with severe traumatic experiences far less likely to respond favorably to treatment than those with multiple bone fractures. The only guarantees that a realistic social worker can give against such formidable odds is that he can help a person having chronic and multiple life-fractures cope with the limitations, with realism, dignity, clarity, and hope... If a social worker can help a significant number of people cope more successfully with such conditions, then that social worker has been both accountable and effective.

The social work profession has been challenged to develop an accountability system which scientifically measures not only goal achievements but also internal and external constraints that limit an agency's and/or a social worker's capacity to meet its goals. A few of the techniques which can improve the standard of accountability are the summative and formative evaluations, the Management by Objectives system, service management approach, and an accountability recording system of casework. The key characteristic of each of these techniques is that they attempt to establish and accomplish clearly defined goals based on the intended client's values and needs. If the goals of policy are not made more coherent and more consistent and if performance is not more explicit and realistic, then there is little hope of attaining accountability for either the agency or the social worker.

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Design 1: The True Pretest-Posttest Control Group Design

	Time			
		1 (pre)		2 (post)
Experimental Group	R	0	X	0
Control Group	R	0		0

Two equivalent groups are formed by random assignment. The units which are randomly assigned might be clients, or agencies, depending on the number of each available and at which level the program is supposed to show its greatest impact. The two groups are measured both before the program treatment starts (the pretest) and after it has had time to produce an effect (the posttest). This is referred to as Design 4 by Campbell and Stanley (p. 8).

Design 2: The True Posttest - Control Group Only Design

	Time		
	1 (pre)		2 (post)
Experimental Group	R	X	0
Control Group	R		0

Two equivalent groups of clients or agencies are formed by random assignment. One gets an experimental treatment, and the other does not. Both are measured at the end of the program only. This is described as Design 6 by Campbell and Stanley (p. 8).

Design 3: Pretest-Posttest Design with the Non-Equivalent Control Group

	Time		
	1 (pre)		2 (post)
Experimental Group	0	X	0
Control Group	0		0

Two groups which are similar, but which were not formed by random assignment, are measured both before and after. One of the groups gets the program treatment. This is equivalent to Design 10 (Quasi-Experimental) given by Stanley and Campbell (p. 40).

Design 4: Time Series Design with Experimental Group Only

	Time								
	1	2	3	4		5	6	7	8
Experimental Group	0	0	0	0	X	0	0	0	0

An instrument related to the program that will eventually be implemented is administered at regular intervals before the program begins, during the program, and then after it ends. This is discussed as Design 7 (Quasi-Experimental) by Campbell and Stanley (p. 40).

Design 5: The Time Series Design with a Non-Equivalent Control Group

	Time					
	1	2	3	4	5	6
Experimental Group	0	0	0	X 0	0	0
Non-Equivalent Control Group	0	0	0	0	0	0

Two groups which are similar but which were not formed by random assignment are measured at regular intervals before and after the program is implemented. This design is just like Design 4 - with the addition of a non-equivalent comparison group. This design is quite similar to Design 14 (the Multiple Time Series Design) discussed by Campbell and Stanley under Quasi-Experimental Designs (p. 56).